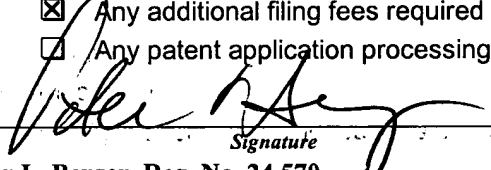
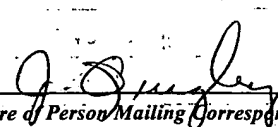


1623

| | | | | | |
|---|-------------------------------------|-----------------------------|--------------------------------|------------------------|-------------------|
| AMENDMENT TRANSMITTAL LETTER (Small Entity) | | | | Docket No. 1373.016 | |
| Applicant(s): Rutenberg, et al | | | | | |
| Serial No. 09/922,013 | Filing Date Aug. 3, 2001 | Examiner R. Gitomer | | Group Art Unit 1623 | |
| Invention: DETECTION OF EPITHELIAL DYSPLASIA | | | | | |
| <u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u> | | | | | |
| Transmitted herewith is an amendment in the above-identified application. <input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted. <input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 23 - | 20 = | 3 x | \$9.00 | \$27.00 |
| INDEP. CLAIMS | 5 - | 3 = | 2 x | \$42.00 | \$84.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 02-2105 in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2105 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. | | | | | |
| Signature:  Peter L. Berger, Reg. No. 24,570 Levisohn, Lerner, Berger & Langsam 757 Third Avenue, Suite 2500 New York, NY 10017 Tel. No. 212-486-7272 Fax No. 212-486-0323 | | | Dated: October 22, 2001 | | |
| <div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on 10/22/01 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.  Signature of Person Mailing Correspondence J. Quigley Typed or Printed Name of Person Mailing Correspondence </div> | | | | | |

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IN THE UNITED STATES PATENT & TRADEMARK OFFICE

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12-18-01
D. Home

In re application: Rutenberg, et al

Serial No. 09/922,013

Filed August 3, 2001

Art Unit 1623

For: DETECTION OF EPITHELIAL
DYSPLASIA

Docket No. 1373.016

Examiner: R. Gitomer

October 22, 2001

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Hon. Commissioner of Patents & Trademarks
Washington, D. C. 20231

RESPONSE

Sir:

In response to the Official Action of Oct. 5, 2001, please consider the
following amendments and remarks.

IN THE SPECIFICATION:

Please replace the paragraph on page 1 under the heading "Related
Applications" as follows:

Related Applications

The present application relates to and is a continuation- in-part of U.S.
Nonprovisional Application Serial No. 09/298,218 filed April 23, 1999, now U.S.
Patent No. 6,284,482 issued Sept. 4, 2001; U.S. Nonprovisional Application Serial
No. 09/298,219 filed April 23, 1999, now U.S. Patent No. 6,297,044 issued Oct.